

**DIGITAL AUDIO RECORDING ORDER**

Read Instructions on Back

(FOR PROCEEDINGS ON OR AFTER AUGUST 1, 2002)

1. NAME <b>Karon V. Johnson</b>		2. PHONE NUMBER <b>479-4146</b>	3. DATE <b>12/21/2007</b>	
4. MAILING ADDRESS <b>Ste. 500, Sirena Plaza, 108 Hernan Cortez</b>		5. CITY <b>Hagatna</b>	6. STATE <b>GU</b>	7. ZIP CODE <b>96910</b>
8. CASE NUMBER <b>05-00053-06</b>	9. CASE NAME <b>U.S. Brian Elm</b>	DATES OF PROCEEDINGS		
		10. FROM <b>5-8-2006</b>	11. TO <b>5-16-2006</b>	
12. PRESIDING JUDICIAL OFFICIAL <b>Judge John Coughenour</b>		LOCATION OF PROCEEDINGS		
		13. CITY <b>Hagatna</b>	14. STATE <b>GU</b>	

15. ORDER FOR  
☐ APPEAL ☒ CRIMINAL ☐ CRIMINAL JUSTICE ACT ☐ BANKRUPTCY  
☐ NON-APPEAL ☐ CIVIL ☐ IN FORMA PAUPERIS ☐ OTHER (Specify)

16. CD REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which duplicate CD(s) are requested.)

PORTION (S)	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	<b>5/8/2006 to 5/16/2006</b>
<input type="checkbox"/> SENTENCING		<b>Trial Proceedings (ALL)</b>	
<input type="checkbox"/> BAIL HEARING			

## 17. ORDER

<input checked="" type="checkbox"/> CD - FTR Gold Format. This format must be played using FTR Player Plus™ software, which will be included on the CD. This software allows the listener to navigate through the recording using time references from the actual proceeding.	NO. CD(s)	NO. COPIES	COSTS
<input type="checkbox"/> Audio CD Format - This format will play in any CD player. This format is limited to an hour or less.			
<input type="checkbox"/> Windows Audio Format - (wma) This format will play using Windows Media Player™ software, as well as other 3rd party software.			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional) upon completion of the order.			
18. SIGNATURE <i>Karon V. Johnson</i>	19. DATE <b>12/27/07</b>		
PROCESSED BY <i>Joe M. May</i>	PHONE NUMBER		
ORDER RECEIVED <i>12/21/07</i>	DATE <i>12/21/07</i>	BY <i>chs</i>	DEPOSIT PAID
DEPOSIT PAID			TOTAL CHARGES
CD DUPLICATED			LESS DEPOSIT
ORDERING PARTY NOTIFIED TO PICK UP CD <i>12/27/07</i>			TOTAL REFUNDED
PARTY RECEIVED CD <b>Case 1:05-cr-00053 Document 389 Filed 12/27/2007 Page 1 of 2</b>			

**INSTRUCTIONS  
GENERAL**

**Use.** Use this form to order duplicate CDs of proceedings. Complete a separate order form for each case number for which CDs are ordered.

**Completion.** Complete Items 1-19. Do *not* complete shaded areas which are reserved for the court's use.

**Order Copy.** Keep a copy for your records.

**Mailing or Delivering to the Court.** Mail or deliver two copies to the Office of the Clerk of Court.

**Deposit Fee.** For orders of 20 or more CDs, the court will notify you of the amount of the required deposit fee which may be mailed or delivered to the court. Upon receipt of the deposit, the court will process the order.

**Delivery Time.** The delivery time is computed from the date of receipt of the deposit fee (if requested, otherwise computed from the court's receipt date), and is normally the next business day for orders requiring only one CD.

**Completion of Order.** The court will notify you when the CDs are completed.

**Balance Due.** If the deposit fee was insufficient to cover all charges, the court will notify you of the balance due which must be paid prior to receiving the completed order.

**SPECIFIC**

Items 1-19. These items should always be completed.

Item 8. Only one case number may be listed per order.

Item 15. Place an "X" in each box that applies.

Item 16. Check specific portion(s) and list specific date(s) of the proceedings for which a copy is requested.

Item 17. Place an "X" in each box that applies. Indicate the number of additional copies ordered.

Item 18. Sign in this space to certify that you will pay all charges upon completion of the order. (This includes the deposit plus any additional charges.)

Item 19. Enter the date of signing.

